CAPStone
THE NEWSLETTER FOR CAP GRANTEES

LATE BREAKING NEWS

Greetings!

NEW CAP PROJECT OFFICERS: CAP Primary contacts should have recently received a letter from HRSA regarding the centralization of Project Officer duties and new Project Officer assignments. Please see the "Contacts" link of the grantee website: www.capcommunity.hrsa.gov for the name and contact information of your new Project Officer. This individual will serve as your new Project Officer Effective June 2, 2003.

BUREAU OF PRIMARY HEALTH CARE GRANTEE MEETING UPDATE: All CAP grantees are invited to join HRSA and their fellow Bureau of Primary Health Care (BPHC) grantees for the 2003 All Primary Health Care Grantee Meeting to be held Sunday, June 29, 2003 - Wednesday, July 2, 2003 at the Omni Shoreham Hotel in Washington, D.C. There will be a special half-day session for CAP grantees on Sunday, June 29, 2003, from noon to 4:00 pm. For details regarding the agenda and registration, please refer to http://minjoh.com/bphc or contact Tina Olson at (301) 594-4110.

The All Grantee meeting will take the place of the CAP Annual Grantee Meeting that was tentatively scheduled for August 2003. However, the time set aside for CAP grantees on Sunday will be a great opportunity for grantee networking. Note: Grantees have the option to utilize CAP budget funds originally dedicated to travel and lodging for the CAP Annual Grantee Meeting for the June 29th Meeting if they so choose.

CAP AUTOMATED MONITORING SYSTEM: The Automated Monitoring system has closed. The next time the system will open will be September 1 through September 30, 2003. The reference period for the next report will be March 1, 2003 through August 31, 2003. Each of the current 158 communities will be able to submit their monitoring data at that time. Communities that wish to print a copy of their report should follow the same process as last time. CAP Communities initially funded in September 2002 that require assistance in printing the report after the system closes should email their questions to cap@synthesisps.com.

Thanks!
Diana

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🏠 CAP TA CALLS

Technical Assistance Calls

Technical assistance calls for grantees are held every other Thursday from 2 to 3 PM EST. The schedule for June appears below. To register, search for summaries or materials from prior calls, or download materials for upcoming calls, please go to the CAP Website: **www.capcommunity.hrsa.gov**. Please remember that the site is password protected. Grantees should contact their primary contact to receive the password. Once you register for the call, please be sure to download the materials that will be used during the call. You should immediately receive a confirmation note by email that includes the call-in number for the call. If you have difficulty registering or do not receive the call-in number, please contact Shandy at **scampbell@mac1988.com** or call 301-468-6006 x437.

CAP TA Calls

Date	Topic
June 12	**Eligibility Screening Systems and Tools** A number of CAP communities are developing or implementing Web or computer-based screening systems and tools to increase and streamline enrollment in public insurance, sliding fee and other programs for their uninsured and underinsured populations. This call will feature two CAP communities who will share their experiences in developing, implementing and utilizing these systems. Our featured speakers will be Denise Daly, M.S., Project Director of Richmond Enhancing Access to Community Healthcare (REACH), Richmond, Virginia; and Kathryn L. Pinkus-Cohen, M.H.A., Project Manager of Community Access Program of Miami-Dade County, Florida. CAP grantees with similar systems and tools are *welcome and encouraged* to share their lessons learned, both barriers and achievements, during the Q&A portion of the call.
June 26	**Evaluation Focus: Baseline Measures** This call will be led by Teresa Brown, CAP Evaluation Coordinator, further details to be announced on the CAP grantee website.

With the exception of calls related to legal issues, TA calls are summarized and posted on the CAP website (*www.capcommunity.hrsa.gov*). Legal issue briefs are posted on the site under legal issues. You may also request an audiotape copy of any previous calls (up to one month after the call) by contacting Shandy Campbell at the email above.

🏠 GRANTEE NEWS

Northland Healthcare Alliance
Bismarck, North Dakota

Congratulations to Northland Healthcare Alliance on their recent funding award from the Department of Transportation (DOT) Federal Transit Administration (FTA)! The funds will be used to develop a management information system (MIS) module, which will facilitate the sharing of transit-related information throughout the state and assist the public with their travel and transportation planning. The module will be added to the existing North Dakota community resource directory (www.NDinfo.org), an exclusive search engine for North Dakota that enables parents, youth, and professionals to access information about providers and agency services statewide. When completed, the system will serve as a centralized online location where the public and transit officials and workers will be able to access information on all forms of transportation within each city. Users will also be able to connect to health providers and other services from all across North Dakota. For more information, contact Betty L Blahna at bblahna@northlandhealth.com.

Hope Medical Outreach Coalition
Omaha, Nebraska

Hope Medical's "Sealing Smiles" School Dental Sealant program is addressing the needs of local children's preventative oral health by providing dental sealant free of charge on site at Omaha Public Schools. Through the program, children in the 2nd and 3rd grades in five Omaha Public Schools receive a dental exam and if necessary, have dental sealant applied to permanent molars. Children can also receive a fluoride treatment. During January through March of 2003, 330 children were seen through Hope Medical Outreach Coalition's collaboration with: Charles Drew Health Center, Indian Chicano Health Center, Douglas County Health Center, Nebraska Health and Human Services Nebraska Health System, Creighton University, and local dental professionals and personnel from the University of Nebraska Medical Center's College of Dentistry. If you would like more information about Hope Medical Outreach Coalition, please contact Andrea Skolkin at askolkin@hopemed.us or Sue Fredricks at sfredricks@hopemed.us.

Jackson Medical Mall
Jackson, Mississippi

The Jackson Medical Mall Foundation/Hinds County Health Alliance (HCHA) is an integrated community-based health care delivery system, which includes four major hospitals and health systems as well as a number of outpatient community health facilities in its CAP consortium. With four major emergency rooms among the hospitals and health system partners, the volume of routine (non-emergent) care cases and disease management cases coming to these emergency rooms has become overwhelming. In response, HCHA, working in concert with the CEOs of the four major hospitals, has established an ER Redirect program to assist uninsured individuals and Medicaid beneficiaries seeking routine care through the ER. Through this program the patient is seen at the ER, and evaluated and treated (in order to comply with EMTALA federal regulations). If the patient has been seen for routine care that could have been handled more appropriately at an outpatient facility, a hospital case manager will assist the patient in linking to a primary care physician, finding a medical home to ensure continuity of care.

Patients that agree to become a member of HCHA sign a consent form allowing basic demographic data to be electronically transmitted to the Alliance. The Alliance in turn will assist the patient in selecting one of six primary care sites for future routine care needs. The consent form is HIPAA compliant and approved by the Institutional Review Board (IRB). An Alliance staff person contacts the patient after having been seen in the ER and offers assistance to enroll them at their choice of community health facilities for ongoing primary health care needs. Patients are also assisted if they have transportation or prescription drug needs resulting from their visit to the ER and subsequent need to be seen at a nearby community health facility. To date, the consensus from the hospital CEO's is that routine care cases are being appropriately triaged, treated and referred to participating community health facilities for more appropriate follow through and continuity of care. If the program is successfully implemented in Hinds County, Medicaid wishes to see it replicated to

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impact all 700,000 of its beneficiaries statewide and the same could be true for the State's 464,000 uninsured. That means that this ER Redirect program could impact 42% of the State's 2.8 million population. For more information on the ER Redirect program, contact James Malloy, MPH at jmalloy@son.umsmed.edu.

Muskegon Community Health Project
Muskegon, Michigan

Muskegon Community Health Project (MCHP) participated in *Cover The Uninsured Week* March 10 -14, 2003, holding a well-attended town hall meeting with 106 community members as well as State and local political figures. MCHP organized this event and three others throughout the week and received media coverage from WOOD TV 8 (NBC), TV13 (ABC) news, and the Muskegon Chronicle. This outreach effort resulted in several referrals and new collaborations with community agencies that have the common goal of getting health coverage to the uninsured individuals in Muskegon County. Other activities included a "train the trainers" day where 48 community

volunteers and health employees from various agencies learned about the multiple health programs that are available for the uninsured and underinsured, including referrals to one of the two Federally Qualified Health Centers (FQHC's) in Muskegon County. A health fair was held at a local high school where collaborating agencies with the MCHP set up booths to promote health care by providing free blood pressure screenings, glaucoma screenings, and blood glucose monitoring.

The Health Project took applications for MIChild/Healthy Kids Medicaid program and referred several people to the FQHC's for the sliding fee scale. A direct result of the week's events was an increase in calls to the Health Project that resulted in 52 referrals to two FQHC's. In addition, the educational component of each event resulted in other agencies promoting the goals under the CAP initiative -- reaching seniors, educators, and local health care providers. For more information, please contact Lynda Balkema at balkemal@mchp.org or Laura Fitzpatrick at lfitzpatrick@mchp.org, or visit the MCHP website at www.mchp.org.

🏠 GRANT OPPORTUNITIES AND AWARDS

Healthy Community Grants to Prevent Diabetes, Asthma and Obesity
Application Deadline: July 15, 2003

This new grants program from the Department of Health and Human Services encourages states, cities and other local government agencies to propose innovative, community-based programs to prevent diabetes, asthma and obesity. Grants will be awarded to support local projects that will demonstrate approaches to reduce the prevalence and impact of the three common chronic health conditions in local communities. The grants are being made available as part of the department's $15 million Steps to a HealthierUS initiative, which advances President Bush's HealthierUS goal of helping Americans live better, longer, and healthier lives. The competitively awarded grants will fund more than a dozen demonstration projects in communities across the country. Local health departments, state health departments and tribal governments are eligible to apply for the grants.

Under the grants program, HHS will award about $13.7 million to communities with the strongest proposals to enhance access to health services, encourage preventive behaviors, and improve the overall health of the community by targeting those populations with the greatest needs. Communities selected for grant awards will use federal resources to build partnerships between public and private organizations working in the areas of prevention, medical, social, educational, business, religious and civic services. The request for applications and other information about the initiative are available at http://www.healthierUS.gov or visit www.phppo.cdc.gov/phtn/RFA.

Tenet Foundation Grants
Application Deadline: Rolling

The Tenet Foundation makes grants available in the following categories: health and wellness, health education, human services, education, civic and community, and arts and humanities. An Online Grant Eligibility Quiz, posted on the web site, enables organizations to determine

whether they fit within the foundation's guidelines. The foundation has established three priority issues for 2003. These include: the nursing shortage, **addressing the medical needs of the uninsured**, and improving the quality and safety of hospital-based patient care. For more information, e-mail: foundation@tenethealth.com or go to http://www.tenethealth.com/tenethealth/tenetfoundation/grantsfunding.

Universal Service Discounts For Rural Health Care Providers

Application Deadline: Rolling Through July 1, 2003

As a result of the 1996 Telecommunications Act, certain rural not-for-profit health care providers may receive telecommunications services necessary for the provision of health care at reduced rates. The Universal Service Administrative Company (USAC) is charged by the Federal Communications Commission (FCC) with the responsibility of administering the program. Over 1,600 rural health care providers have previously received Universal Service support to reduce the cost of their telecommunications services. The application window for Program Year 2003 (7/1/03 – 6/30/04) of the Universal Service support mechanism for rural health care providers opened on March 26, 2003 and is rolling through July 1, 2003. However, applicants are encouraged to file their forms as early as possible. For questions about program eligibility, general information and assistance, or to obtain an application form (Form 465) call: 1-800-229-5476 or visit: www.rhc.universalservice.org

🏠 CONFERENCES, PROGRAMS, AND OTHER NEWS

Cross-Cultural Communication Conference

June 4, 2003, Satellite Broadcast

The HRSA/Center for Health Services Financing and Managed Care and Department of Health and Human Services/Office of Minority Health will present a satellite broadcast on Wednesday, June 4, 2003 on *Cross-Cultural Communication In Health Care: Building Organizational Capacity*. The broadcast will provide a practical and dramatic look at increasing language services in managed care settings for low-income populations. Selected national experts will include: Robert C. Like, M.D., M.S., Associate Professor and Director, Center for Healthy Families and Cultural Diversity , UMDNJ-Robert Wood Johnson Medical School; and Shani Dowd, L.C.S.W., Director of Clinical Cultural Competency Training, Harvard Pilgrim Health Care.

Participants will learn: why delivering culturally & linguistically appropriate care makes sense from business & quality perspectives; how organizations are effectively providing linguistically appropriate care; what can be done to build an organization's capacity to deliver linguistically appropriate care; and where to go for useful information and resources.

Experts in the field will offer best practices; dramatic illustrations will highlight successful strategies and common pitfalls; and video clips will enhance understanding. For information visit: http://www.hrsa.gov/ financeMC/ broadcast/default.htm.

Community Health Conference

October 23-25, 2003, Nashville, Tennessee

The Association for Community Health Improvement (ACHI) 2003 annual conference, *Community Health in Challenging Times: Proven Practices, Promising Innovations* will take place in Nashville, Tennessee from October 23-25. This national community health and healthy communities gathering will offer educational and networking opportunities focused on four topic tracks: Achieving Health Equity, Securing Resources, Maximizing Access and Coverage, and Advocating Healthy Policy. ACHI is hosting the annual conference with Communities Joined in Action, an access to care and health disparities coalition. Other participating organizations include: the Catholic Health Association, National Association of County and City Health Officials, Health Forum Fellowship Programs, and the VHA Health Foundation. For information, visit www. communityhlth.org/conference/annual.html.

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🏠 REPORTS AND ISSUE BRIEFS

Profile of Older Hispanic Americans

The Center on an Aging Society has just released the ninth in a series of Data Profiles on chronic and disabling conditions. The newest Data Profile, *Older Hispanic Americans: Less care for chronic conditions,* reveals that although similar proportions of Hispanic and non-Hispanic adults age 50 and older in the U.S. have common chronic conditions, health care expenditures are generally lower for Hispanics and patterns of health service use differ. Lower health insurance rates among Hispanic adults in this age group likely have an impact on care for chronic conditions. The Profile also reports that Hispanic adults with chronic conditions have more difficulty obtaining health care and are less satisfied with their care than non-Hispanic adults with chronic conditions. To access the full report visit: http://ihcrp.georgetown.edu/ agingsociety/hispanics/hispanics.html

New HRSA Resources

CAP communities may find the following three new publications from the Health Resources and Services Administration (HRSA) Center for Health Services Financing and Managed Care as valuable resources:

Serving Persons with Disabilities in Medicaid Managed Care: Assuring Continuity, Quality and Cost Effectiveness

This conference, cosponsored by HRSA and the Center for Medicare and Medicaid Services (CMS) in Los Angeles, California on April 17, 2002, offered core information to enable participants to provide quality, comprehensive services to persons with disabilities in a Medicaid managed care setting. Within this document there are summaries of presentations on rate setting and data collection information, and current trends and issues in the field, including successful approaches regarding the creation of health care teams. The proceedings contain much data demonstrating the cost effectiveness of various managed care and other delivery systems and risk adjustments in addition to statistics concerning persons with disabilities. Copies of this publication may be downloaded from HRSA's Center for Health Services Financing and Managed Care website at www.hrsa.gov/financeMC.

Bridging Cultures and Enhancing Care: Approaches to Cultural and Linguistic Competency in Managed Care

This conference sponsored by HRSA in Chicago, Illinois on May 30, 2002 covered information that enabled participants to define and assess the cultural and linguistic competency of their organization and provider network in a managed care setting. Within this document there are summaries of presentations on the effects of race and ethnicity on the delivery of quality health care, strategies for organizational change, and clinical issues when delivering culturally and linguistically appropriate health care services. There is also information from programs that have addressed the problem of cultural and linguistic competency successfully within their own organizations.

This document could serve as a valuable reference for any organization that is looking for more information on the implementation of cultural and linguistic competencies within their own organizations. Copies of this document are available at www.hrsa.gov/financeMC and through the HRSA Information Center at 1-888-ASK-HRSA.

Pharmacy Management Self-Assessment Tool for Plans and Providers Serving Low-Income Populations

HRSA has developed this pharmacy self-assessment tool in conjunction with the National Public Health and Hospital Institute (NPHHI) to enable and encourage Medicaid managed care organizations to evaluate their own pharmacy management performance. The tool will allow health plan administrators, pharmacy directors, medical directors, and others to determine their effectiveness in four critical areas: cost control, access, quality and clinical effectiveness, and safety.

The Self-Assessment Tool focuses on six key activities of pharmacy management: formulary development, prescribing practices, order fulfillment, medication use, monitoring and feedback, and clinical records. Copies of this document are available through the HRSA Information Center at 1-888-ASK-HRSA.

⌂ WEB RESOURCES

Language Services Action Kit

The Language Services Action Kit, developed by The Access Project (www.accessproject.org) and the National Health Law Program includes materials that: explain relevant federal policies; describe how states can and do secure federal funds to help pay for language services in their Medicaid and SCHIP programs; provide information to demonstrate the need for language services in health care settings; and offer resources and suggestions for undertaking advocacy for state and federal financing of language services. For a limited time, the price of the kit is $15.00. To place an order, use the order form available at http://www. accessproject.org/downloads/LEPform.pdf or email your mailing and billing information to lepactionkit@accessproject.org. An invoice will be enclosed with the kit. Payment must be in the form of a check or money order. Prices include shipping and handling. Please contact Meg Baker at mbaker@accessproject.org if you have questions about ordering the kit.

Privacy Practices in Plain English

This is a document that will help the writer of a Notice of Privacy Practices create a notice that does not require a high literacy level. The document describes principles for writing plain English, clear layout, and presentation. It also suggests some easily understandable words and phrases that can be used. The material can be found at: http://www.hrsa.gov/language.htm or through the HRSA HIPAA web page: http://www.hrsa.gov/website.htm.

Public Health Workforce Resource

Partners in Information Access for the Public Health Workforce is a collaboration of U.S. government agencies, public health organizations and health sciences libraries with a goal of providing the public health workforce with timely, convenient access to information resources to aid them in improving the health of the American public.

Project activities and resources include: developing tools and other resources for the public health workforce in grant writing, needs assessment, and training; sponsoring meetings, workshops, and satellite broadcasts geared toward improving content of and access to information needed by public health professionals and the information professionals who work with them; developing distance learning materials and fostering partnerships for distance learning initiatives; providing ongoing information on funding opportunities and training available to public health professionals; exhibiting at national meetings of public health professionals; funding projects to train and provide outreach to public health professionals; and providing public health guidelines via the National Library of Medicine's HSTAT, a free, full-text resource (accessed at http://hstat.nlm.nih.gov/).

For information on these and other project initiatives, visit the Partners' web site at http://phpartners.org.